

**STUDENT EXCHANGE PROGRAMME
APPLICATION PROGRAMME
(INBOUND)**

☐

PARTNER UNIVERSITY/INSTITUTION

Name of University/Institution: _____

*Affix Passport Size
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Blue Background*

Instructions:

- All support documents (certified) must be submitted together with this application.
- Please send your application by mail or by email through your home university / institution to:

Chancellery and International Relations Office
Universiti Malaysia Sarawak
3rd Floor, Chancellery Building,
94300, Kota Samarahan,
Sarawak, Malaysia
Tel: +6082 582 792 / +6082 581 918
Fax: +6082 665 088
Email: mmflendai@unimas.my

SECTION 1: PERSONAL DETAILS

Given Name	:					Date of Birth	:				
Surname	:					Marital Status	:				
Gender	:	Male:		Female:		Occupation	:				
Country of Birth	:					Citizenship	:				
Pasport No	:					Expiry Date	:				
Mailing Address	:										
Zip Code	:			State	:			Country	:		
Phone No	:			Email	:						

SECTION 2: ACADEMIC PARTICULARS									
Name of Current University									
Address of Current University	Zip Code		State		Country				
Current Degree Programme									
Area of Study									
Level of Study	Undergraduate				Postgraduate				
	Others, please Specify : _____								
Year of Study		1 st		2 nd		3 rd		4 th	Others: _____

Academic Transcript: Please provide an up-to-date certified copy of Academic Transcript showing all the subjects attempted, grades (including failures), and an explanation of the grading system. Applicants who submit transcripts in a language other than English must provide an officially certified translation.

SECTION 3: PROPOSED PROGRAMME							
Programme of Study		Student Exchange			Short-Term Programme (with Credit)		
		Short-Term Programme (with Credit)			Internships		
		Others (Please specify): _____					
Proposed Commencement							
Durations of Study		1 Semester			2 Semesters		Other (Specify)
Accommodation Preference		University residential (sharing)			University Residential		

If possible, please list at least 4 courses. Please refer to UNIMAS website(www.unimas.my) for information on academic programmes or contact the international office.

Code/Course Name

SECTION 4: ENGLISH PROFICIENCY				
a. Is English your main or first language		Yes		No
b. Is English your current medium of academic instruction		Yes		No
If no to a & b, please indicate any English language proficiency test you have taken and the result		IELTS Band:		
		TOEFL Score		
		Others, please specify Result: _____		

SECTION 5: DECLARATION

I declare that the information given in this application is correct and complete.

Applicant's Signature	
Date	

SECTION 6: HOME INSTITUTION APPROVAL

Approved for Exchange Programme

Name of Officer in Charge	
Signature of Officer in Charge	
Date	

SECTION 7: FOR UNIMAS OFFICE USE ONLY

Faculty Dean's Comment:

Dean Signature		Official Stamp
Date		

Chancellery & International Relations Office

Director's Signature		Official Stamp
Date		